

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	NW	76534	03-31-99
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		71090	4/20/99

INF

☐ ..... Rejected  
☐ ..... Allowed  
 (Through numeral) ..... Canceled  
☐ ..... Restricted  
☐ ..... Non-elected  
☐ ..... Interference  
☐ ..... Appeal  
☐ ..... Objected

Claim	Final	Original	Date
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28			
29			
30			
31			
32			
33			
34			
35			
36			
37			
38			
39			
40			
41			
42			
43			
44			
45			
46			
47			
48			
49			
50			

Claim	Final	Original	Date
51			
52			
53			
54			
55			
56			
57			
58			
59			
60			
61			
62			
63			
64			
65			
66			
67			
68			
69			
70			
71			
72			
73			
74			
75			
76			
77			
78			
79			
80			
81			
82			
83			
84			
85			
86			
87			
88			
89			
90			
91			
92			
93			
94			
95			
96			
97			
98			
99			
100			

Claim	Final	Original	Date
101			
102			
103			
104			
105			
106			
107			
108			
109			
110			
111			
112			
113			
114			
115			
116			
117			
118			
119			
120			
121			
122			
123			
124			
125			
126			
127			
128			
129			
130			
131			
132			
133			
134			
135			
136			
137			
138			
139			
140			
141			
142			
143			
144			
145			
146			
147			
148			
149			
150			

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)

# Index of Claims (continued)



Application No.

09/273,164

Examiner

Jacob Cheu

Applicant(s)

ROBERTS ET AL.

Art Unit

1641

✓	Rejected
=	Allowed

-	(Through numeral) Cancelled
+	Restricted

✓	Non-Elected
I	Interference

A	Appeal
O	Objected

Claim		Date	
Final	Original		
	151		
	152		
	153		
	154		
	155		
	156		
	157		
	158		
	159		
	160		
	161		
	162		
	163		
	164		
	165		
	166		
	167		
	168		
	169		
	170		
	171		
	172		
	173		
	174		
	175		
	176		
	177		
	178		
	179		
	180		
	181		
	182		
	183		
	184		
19	185		
20	186		
21	187		
22	188		
23	189		
24	190		
	191		
	192		
	193		
	194		
	195		
	196		
	197		
	198		
	199		
	200		

Claim		Date	
Final	Original		
	201		
	202		
	203		
	204		
	205		
	206		
	207		
	208		
	209		
	210		
	211		
	212		
	213		
	214		
	215		
	216		
	217		
	218		
	219		
	220		
	221		
	222		
	223		
	224		
	225		
	226		
	227		
	228		
	229		
	230		
	231		
	232		
	233		
	234		
	235		
	236		
	237		
	238		
	239		
	240		
	241		
	242		
	243		
	244		
	245		
	246		
	247		
	248		
	249		
	250		

Claim		Date	
Final	Original		
	251		
	252		
	253		
	254		
	255		
	256		
	257		
	258		
	259		
	260		
	261		
	262		
	263		
	264		
	265		
	266		
	267		
	268		
	269		
	270		
	271		
	272		
	273		
	274		
	275		
	276		
	277		
	278		
	279		
	280		
	281		
	282		
	283		
	284		
	285		
	286		
	287		
	288		
	289		
	290		
	291		
	292		
	293		
	294		
	295		
	296		
	297		
	298		
	299		
	300		